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**FAX COVER PAGE**

**TO:** U.S. Patent and Trademark Office  
**TELEFAX #:** (703) 305-7687  
**ATTENTION:** Examiner Shih  
**DATE:** April 29, 2003  
**TIME:** 3:10 p.m.  
**NUMBER OF PAGES:** 11 total page(s) (including this cover)  
**FROM:** Rochelle Lieberman, Esq.  
**RE:** Serial No. 09/656,320  
**DESCRIPTION:** Response to First Office Action  
**COMMENT:**

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<b>Voice Confirmation Required:</b>	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
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I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, Fax No. (703) 305-7687 on April 29, 2003.	
<u>4/29/03</u> Date of Deposit	<u>[Signature]</u> Rochelle Lieberman

**PATENT**  
**Atty. Docket No.: BEA920000003US1**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Delany et al.

SERIAL NO.: 09/656,320

FILING DATE: September 6, 2000

FOR: Method For Usage Billing In  
An Internet Environment

Group Art Unit: 3624

Examiner: Shih, S.

**AMENDMENT TRANSMITTAL LETTER**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

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Sir:

Enclosed is an amendment in the above-identified patent application.

☐ ☐ verified statement(s) claiming small entity status

☐ are also enclosed ☐ was submitted previously.

☐ A Petition for Extension of Time is also enclosed.

☒ An Associate Power of Attorney is also enclosed.

☒ No additional fee is required.

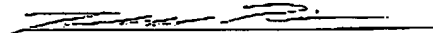
☐ An additional fee is required, and is calculated as shown below:

FEE CALCULATION TABLE					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Total Claims	17	MINUS 20 =	0	x \$18 =	\$0
Independent Claims	3	MINUS 3 =	0	x \$84 =	\$0
If Amendment adds multiple dependent claims, add \$220.00					
Patent Extension Fee Under 37 C.F.R. §1.136(a) for ___ Months					N/A
Total Amendment Fee					
If small entity status is claimed, subtract 50% of Total Amendment Fee					
<b>TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT</b>					<b>\$0</b>

☐ A Credit Card Payment Form in the amount of \$\_\_\_ is enclosed.

☐ Charge \$\_\_\_\_\_ to Deposit Account No.

Respectfully submitted,

By: 

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